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| Fill in this information to identify your case: | | |
|---|-------------------------------|--------------------------------------|
| United States Bankruptcy Court for the: | | |
| SOUTHERN DISTRICT OF NEW YORK | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

02/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | rt 1: Identify Yourself | dentify Yourself | | | | | | |
|-----|--|--|---|--|--|--|--|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | | | |
| 1. | Your full name | | | | | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. | Abubeckr First name A Middle name Alsaidi Last name and Suffix (Sr., Jr., II, III) | First name Middle name Last name and Suffix (Sr., Jr., II, III) | | | | | |
| 2. | All other names you have used in the last 8 years Include your married or maiden names. | 9 | | | | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-1359 | | | | | | |

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Debtor 1 Abubeckr A Alsaidi Case number (if known)

| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
|--|---|--|--|--|
| Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) EIN | | |
| Where you live | 2741 Sedgwick Avenue | If Debtor 2 lives at a different address: | | |
| | Bronx, NY 10468 Number, Street, City, State & ZIP Code Bronx | Number, Street, City, State & ZIP Code | | |
| | County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |
| | Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) Business name(s) Business name(s) EIN Where you live 2741 Sedgwick Avenue Apt 1D Bronx, NY 10468 Number, Street, City, State & ZIP Code Bronx County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing this district to file for bankruptcy Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filling this petition, I have lived in this district longer than in any other district. I have another reason. | | |

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| Deb | otor 1 | Abubeckr A Alsai | di | | Case number (if known) | |
|-----|--------|---|---|---|---|---------------------------|
| | | | | | | |
| Par | | | Your Bankruptcy Case | | | |
| 7. | Bank | chapter of the cruptcy Code you are | | ription of each, see <i>Notice Requir</i> top of page 1 and check the app | ed by 11 U.S.C. § 342(b) for Individuals Filing for Ba opriate box. | nkruptcy |
| | choo | sing to file under | Chapter 7 | | | |
| | | | ☐ Chapter 11 | | | |
| | | | ☐ Chapter 12 | | | |
| | | | ☐ Chapter 13 | | | |
| 8. | How | you will pay the fee | about how you may pa | y. Typically, if you are paying the | e check with the clerk's office in your local court for n fee yourself, you may pay with cash, cashier's check ur behalf, your attorney may pay with a credit card or | k, or money |
| | | | | in installments. If you choose thi Ilments (Official Form 103A). | s option, sign and attach the Application for Individua | als to Pay |
| | | | but is not required to, we that applies to your fan | vaive your fee, and may do so on nily size and you are unable to pa | option only if you are filing for Chapter 7. By law, a j y if your income is less than 150% of the official pov y the fee in installments). If you choose this option, y ived (Official Form 103B) and file it with your petition | erty line ou must fill |
| 9. | | you filed for | ■ No. | | | |
| | | ruptcy within the 3 years? | ☐ Yes. | | | |
| | | • | D : | When | Case number | |
| | | | District | When | Case number | |
| | | | District | When | Case number | |
| 10. | Are a | iny bankruptcy | ■ No | | | |
| | | s pending or being by a spouse who is | ☐ Yes. | | | |
| | you, | iling this case with or by a business ner, or by an ate? | | | | |
| | | | Debtor | | Relationship to you | |
| | | | District | When | Case number, if known | |
| | | | Debtor | | Relationship to you | |
| | | | District | When | Case number, if known | |
| 11. | | ou rent your | ■ No. Go to line 12. | | | |
| | resid | lence? | ☐ Yes. Has your landlor | d obtained an eviction judgment a | against you? | |

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

No. Go to line 12.

this bankruptcy petition.

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| Deb | Abubecki A Alsaid | aı | | | Case number (if known) |
|-----------------|---|--------------------|------------------|--|---|
| _ | D 144 14 D | | v • | | |
| Par | Report About Any Bu | sinesses | You Own | as a Sole Propriet | or |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | |
| | | ☐ Yes. | Name | and location of bus | iness |
| | A sole proprietorship is a | | | | |
| | business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | of business, if any | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | er, Street, City, Stat | e & ZIP Code |
| | it to this petition. | | Check | the appropriate box | x to describe your business: |
| | | | | Health Care Busin | ess (as defined in 11 U.S.C. § 101(27A)) |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | Stockbroker (as de | efined in 11 U.S.C. § 101(53A)) |
| | | | | Commodity Broker | r (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business | deadline operation | s. If you in | dicate that you are a ow statement, and for | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure |
| | debtor? For a definition of small | ■ No. | I am n | ot filing under Chap | ter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am fi Code. | ling under Chapter | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | | | 11, I am a small business debtor according to the definition in the Bankruptcy Code, occeed under Subchapter V of Chapter 11. |
| | | ☐ Yes. | | | 11, I am a small business debtor according to the definition in the Bankruptcy Code, under Subchapter V of Chapter 11. |
| Par | t4: Report if You Own or | · Have Any | / Hazardo | us Property or Any | Property That Needs Immediate Attention |
| 14. | Do you own or have any | ■ No. | | | |
| | property that poses or is alleged to pose a threat | ☐ Yes. | | | |
| | of imminent and | ப 103. | What is t | he hazard? | |
| | identifiable hazard to public health or safety? | | | | |
| | Or do you own any property that needs immediate attention? | | | iate attention is why is it needed? | |
| | For example, do you own perishable goods, or livestock that must be fed, | | Where is | the property? | |
| | or a building that needs | | | | |
| urgent repairs? | urgent repairs? | | | | Number, Street, City, State & Zip Code |

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Debtor 1 Abubeckr A Alsaidi Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

.....,

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. 20-10596-rg Doc 1 Filed 02/26/20 Entered 02/26/20 11:23:27 Main Document Pg 6 of 47

| Deb | tor 1 Abubeckr A Alsai | di | | Cas | se number (if known) | |
|------|--|-------------------------|--|---|----------------------------------|----------------------------------|
| Part | t 6: Answer These Quest | ions for Rep | porting Purposes | | | |
| 16. | What kind of debts do you have? | 16a. <i>i</i> | Are your debts primarily andividual primarily for a pe | consumer debts? Consumer debtersonal, family, or household purpos | ts are defined in 11 U.S se." | S.C. § 101(8) as "incurred by an |
| | | ſ | ☐ No. Go to line 16b. | | | |
| | | I | Yes. Go to line 17. | | | |
| | | | | business debts? Business debts avestment or through the operation of | | |
| | | ſ | ☐ No. Go to line 16c. | | | |
| | | ſ | ☐ Yes. Go to line 17. | | | |
| | | 16c. S | State the type of debts you | owe that are not consumer debts of | or business debts | |
| 17. | Are you filing under Chapter 7? | □ No. I | am not filing under Chapt | er 7. Go to line 18. | | |
| | Do you estimate that after any exempt | | | . Do you estimate that after any exd ds will be available to distribute to u | | ded and administrative |
| | property is excluded and administrative expenses | ı | ■ No | | | |
| | are paid that funds will be available for | ı | ⊐ Yes | | | |
| | distribution to unsecured creditors? | | | | | |
| 18. | How many Creditors do | 1 -49 | | □ 1,000-5,000 | □ 25.0 | 001-50,000 |
| | you estimate that you owe? | ☐ 50-99 | | ☐ 5001-10,000 | | 001-100,000 |
| | owe: | □ 100-199 |) | 1 0,001-25,000 | ☐ More | e than100,000 |
| | | □ 200-999 | 9 | | | |
| 19. | How much do you | \$0 - \$50 | 0.000 | □ \$1,000,001 - \$10 millio | n 🗆 \$500 | 0,000,001 - \$1 billion |
| | estimate your assets to be worth? | | - \$100,000 | □ \$10,000,001 - \$50 mill | lion 🗆 \$1,0 | 000,000,001 - \$10 billion |
| | be worth: | | 01 - \$500,000 | □ \$50,000,001 - \$100 mil | | ,000,000,001 - \$50 billion |
| | | □ \$500,00 | 01 - \$1 million | □ \$100,000,001 - \$500 m | nillion $f \sqcup$ More | e than \$50 billion |
| 20. | How much do you | \$0 - \$50 | 0.000 | □ \$1,000,001 - \$10 millio | n 🗆 \$500 | 0,000,001 - \$1 billion |
| | estimate your liabilities to be? | | 1 - \$100,000 | □ \$10,000,001 - \$50 mill | | 000,000,001 - \$10 billion |
| | 10 00. | | 01 - \$500,000 | □ \$50,000,001 - \$100 mil | · | 0,000,000,001 - \$50 billion |
| | | □ \$500,00 | 01 - \$1 million | □ \$100,000,001 - \$500 m | nillion LI Moi | re than \$50 billion |
| Part | 7: Sign Below | | | | | |
| For | you | I have exa | mined this petition, and I d | leclare under penalty of perjury that | the information provid | ed is true and correct. |
| | | | | r 7, I am aware that I may proceed, e relief available under each chapte | | |
| | | | | d not pay or agree to pay someone the notice required by 11 U.S.C. § | | to help me fill out this |
| | | I request re | elief in accordance with the | e chapter of title 11, United States 0 | Code, specified in this | petition. |
| | | bankruptcy 1519, and | case can result in fines u | nt, concealing property, or obtaining p to \$250,000, or imprisonment for | | |
| | | | r A Alsaidi | Signature | of Debtor 2 | |
| | | Executed of | February 26, 2020 MM / DD / YYYY | Executed | on MM / DD / YYYY | , |
| | | | | <u> </u> | | |

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| Debtor 1 Abubeckr A Alsaidi | Case number (if known) | |
|-----------------------------|------------------------|--|
| | | |

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Christopher L. Esposito, Esq. Signature of Attorney for Debtor | Date | February 26, 2020 MM / DD / YYYY |
|--|---------------|-------------------------------------|
| Christopher L. Esposito, Esq. CE2815 Printed name | | |
| Christopher L. Esposito, Esq. | | |
| 269 West 231st Street Bronx, NY 10463 Number, Street, City, State & ZIP Code | | |
| Contact phone 718-796-6454 | Email address | espositolaw@verizon.net |
| CE2815 NY Bar number & State | | |

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| Fill in this infor | rmation to identify your | case: | | |
|---|--------------------------|-------------------|-------------|------------------------------------|
| Debtor 1 | Abubeckr A Alsai | idi | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | SOUTHERN DISTRICT | OF NEW YORK | |
| Case number | | | | Charlet this is an |
| (II KIIOWII) | | | | Check if this is an amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your as Value o | ssets of what you own |
|----|--|--------------------|-------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 4,762.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 4,762.00 |
| Pa | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 26,042.33 |
| | Your total liabilities | \$ | 26,042.33 |
| Pa | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,075.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,575.00 |
| Pa | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sc | chedules. |
| | ■ Yes | | |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Abubeckr A Alsaidi Case number (if known)

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. |

\$ 2,075.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

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| 20- | -10390-ig D0 | | Pg 10 of 47 | ani Document |
|---------------------------------|----------------------------|-----------------------------------|--|--|
| Fill in this infor | rmation to identify yo | ur case and this filing: | g 10 01 11 | |
| Debtor 1 | Abubeckr A Als | saidi | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the | E: SOUTHERN DISTRICT C | DF NEW YORK | |
| | annuation countries and | | | |
| Case number | | | | Check if this is an amended filing |
| | | | | amended hilling |
| Official Ea | orm 1061/P | | | |
| | orm 106A/B | | | |
| Schedu | <u>le A/B: Pro</u> | perty | | 12/15 |
| | | | ce. If an asset fits in more than one category, list the as e are filing together, both are equally responsible for s | |
| | | | e are filling together, both are equally responsible for s any additional pages, write your name and case numbe | |
| Part 1: Describe | - Fach Residence Ruildi | ng, Land, or Other Real Estate \ | You Own or Have an Interest In | |
| Part 1. Describe | e Lacii Residelice, Bullul | ng, Land, or Other Real Estate | ou own or have an interest in | |
| . Do you own or | have any legal or equital | ole interest in any residence, bu | ilding, land, or similar property? | |
| ■ No. Go to Pa | art 2. | | | |
| ☐ Yes. Where | is the property? | | | |
| | | | | |
| Part 2: Describe | e Your Vehicles | | | |
| Describe | Tour vernoies | | | |
| | | | nicles, whether they are registered or not? Include | de any vehicles you own that |
| someone eise ar | ives. If you lease a vel | nicie, also report it on Scriedu | lle G: Executory Contracts and Unexpired Leases. | |
| B. Cars, vans, t | rucks, tractors, sport | utility vehicles, motorcycle | es | |
| ■ No | | | | |
| □ Yes | | | | |
| — 100 | | | | |
| 1. Watercraft, a | ircraft, motor homes | . ATVs and other recreation | al vehicles, other vehicles, and accessories | |
| | | | sels, snowmobiles, motorcycle accessories | |
| ■ No | | | | |
| | | | | |
| ☐ Yes | | | | |
| | | | | |
| 5 Add the doll | lar value of the portion | n you own for all of your en | ntries from Part 2, including any entries for | |
| | | | = | \$0.00 |
| | | | | |
| | Your Personal and Hou | | fallanda itama? | Commant value of the |
| Do you own or | nave any legal or eq | uitable interest in any of the | e following items? | Current value of the portion you own? |
| | | | | Do not deduct secured |
| 6. Household q | oods and furnishing | S | | claims or exemptions. |
| Examples: M | | ire, linens, china, kitchenware | 9 | |
| □ No | ., | | | |
| Yes. Desc | cribe | | | |
| | Househ | old Goods and Furnishi | ngs | \$1,200.00 |

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

■ No

20-10596-rg Doc 1 Filed 02/26/20 Entered 02/26/20 11:23:27 Main Document Pg 11 of 47 Debtor 1 Abubeckr A Alsaidi Case number (if known) ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10 Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$400.00 Wearing Apparel Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,600.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes..... \$100.00 Cash 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ■ No Institution name: ☐ Yes.....

Official Form 106A/B Schedule A/B: Property page 2

20-10596-rg Doc 1 Filed 02/26/20 Entered 02/26/20 11:23:27 Main Document Pq 12 of 47 Debtor 1 Abubeckr A Alsaidi Case number (if known) 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 3

| | | · · | | Filed 02/26/20 Pg | Entered 02 g 13 of 47 | | | //ain Docur | nent |
|-----|------------------------|--|----------------------------------|--|--------------------------|-----------------------------------|---------------|-------------------|---------------|
| De | ebtor 1 | Abubeckr A Als | aidi | | | Case nur | mber (if knov | vn) | |
| | □ No | funds owed to you Give specific informa | ation about th | nem, including whether yo | u already filed the | returns and the ta | эх years | | |
| | | | | Estimated Income T | ax Refund for | 2019 Fed | deral | _ | \$3,062.0 |
| | Examp ■ No | support bles: Past due or lum Give specific informa | | ny, spousal support, child | support, maintena | ance, divorce settl | ement, prop | perty settlement | |
| | Exam _i ■ No | | disability insu I loans you m | urance payments, disabilit nade to someone else | y benefits, sick pa | y, vacation pay, v | vorkers' cor | mpensation, Soc | cial Security |
| | Examp ■ No | | , or life insu | rance; health savings accordance; health savings accordance; | | | renter's ins | | |
| | If you some of | | a living trus | name: ou from someone who hat, expect proceeds from a | | Beneficiary: cy, or are currently | y entitled to | value | |
| 33. | Claims Examp | s against third partie | es, whether loyment disp | or not you have filed a lautes, insurance claims, or | | demand for pay | ment | | |
| | ■ No □ Yes. | Describe each claim | ١ | aims of every nature, inc | luding countercl | aims of the debto | or and righ | ts to set off cla | ims |
| | ■ No | nancial assets you d | | dy list | | | | | |
| 36 | | | | atries from Part 4, includ | | | | | \$3,162.00 |
| Pa | rt 5: De | scribe Any Business-R | elated Proper | rty You Own or Have an Inter | rest In. List any rea | estate in Part 1. | | | |
| ı | No. Go | own or have any legal of to Part 6. Go to line 38. | or equitable in | terest in any business-relate | ed property? | | | | |
| Pa | | scribe Any Farm- and (ou own or have an intere | | Fishing-Related Property You , list it in Part 1. | ı Own or Have an In | terest In. | | | |

Official Form 106A/B Schedule A/B: Property page 4

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

Doc 1 Filed 02/26/20 Entered 02/26/20 11:23:27 20-10596-rg Main Document Pq 14 of 47 Debtor 1 Abubeckr A Alsaidi Case number (if known) ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$1,600.00 Part 4: Total financial assets, line 36 \$3,162.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$4,762.00 Copy personal property total \$4,762.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$4,762.00

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| | 3 | | Pg 15 of 47 | |
|---------------------|--------------------------|-------------------|-----------------|--------------------------------------|
| Fill in this info | rmation to identify you | r case: | | |
| Debtor 1 | Abubeckr A Alsa | aidi | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| Official Fo | orm 106C | | | |
| Schedul | le C: The Pr | operty You (| Claim as Exempt | 4/19 |
| | | | | |

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the

| exe | emption to a particular dollar amount and the che applicable statutory amount. | | | | | | | |
|-----|--|---|--------|---|------------------------------------|--|--|--|
| Pa | It 1: Identify the Property You Claim as E | exempt | | | | | | |
| 1. | Which set of exemptions are you claiming | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. | | | | | | |
| | ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | | |
| | You are claiming federal exemptions. 11 | U.S.C. § 522(b)(2) | | | | | | |
| 2. | For any property you list on Schedule A/B | that you claim as exc | empt, | fill in the information below. | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption | | | |
| | Schedule A/B that lists this property | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | | | |
| | Household Goods and Furnishings Line from Schedule A/B: 6.1 | \$1,200.00 | | \$1,200.00 | 11 U.S.C. § 522(d)(3) | | | |
| | Line from Scriedule AVB: 0.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | Wearing Apparel | \$400.00 | | \$400.00 | 11 U.S.C. § 522(d)(3) | | | |
| | Line from Schedule A/B: 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | Cash | \$100.00 | | \$100.00 | 11 U.S.C. § 522(d)(5) | | | |
| | Line from Schedule A/B: 16.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | Federal: Estimated Income Tax Refund for 2019 | \$3,062.00 | | \$3,062.00 | 11 U.S.C. § 522(d)(5) | | | |
| | Line from Schedule A/B: 28.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every No Yes. Did you acquire the property covers | 3 years after that for ca | ases f | · | , | | | |

Official Form 106C

Yes

Debtor 1 Abubeckr A Alsaidi Case number (if known)

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| Fill in this infor | rmation to identify your | case: | | |
|------------------------|--------------------------|-------------------|-------------|-----------------------|
| Debtor 1 | Abubeckr A Alsa | idi | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | |
| Case number (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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| | | Ü | Pg | 18 of 47 | | |
|---------------------------------|--|---|--|--|---|--|
| Fill | in this information to | identify your cas | se: | | | |
| Deb | otor 1 Abube | eckr A Alsaidi | | | | |
| | First Nam | ie | Middle Name | Last Name | | |
| | otor 2 use if, filing) First Nam | ne | Middle Name | Last Name | | |
| Unit | ted States Bankruptcy C | Court for the: | SOUTHERN DISTRICT OF | NEW YORK | | |
| Cas (if kn | e number | | | | | theck if this is an mended filing |
| | icial Form 106E hedule E/F: Cre | | o Have Unsecure | d Claims | | 12/15 |
| any e Sche D: Cr the C | executory contracts or une dule G: Executory Contra- reditors Who Have Claims continuation Page to this poer (if known). | expired leases that cts and Unexpired Secured by Prope page. If you have n | could result in a claim. Also Leases (Official Form 106G). rty. If more space is needed, o information to report in a P | list executory contracts on Do not include any creditor copy the Part you need, fill | editors with NONPRIORITY claim Schedule A/B: Property (Official s with partially secured claims th it out, number the entries in the b the top of any additional pages, w | Form 106A/B) and on lat are listed in Schedule loxes on the left. Attach |
| | Do any creditors have pri | | | | | |
| | No. Go to Part 2. | orny unscoured on | amis agamst you. | | | |
| | Yes. | | | | | |
| | ☐ Yes. | | | | | |
| Par | t 2: List All of Your | NONPRIORITY (| Jnsecured Claims | | | |
| 3. | Do any creditors have no | npriority unsecure | d claims against you? | | | |
| | ☐ No. You have nothing to | report in this part. | Submit this form to the court wi | th your other schedules. | | |
| | Yes. | | | | | |
| | claim, list the creditor separ | ately for each claim | . For each claim listed, identify | what type of claim it is. Do no | claim. If a creditor has more than of this claims already included in Part ecured claims fill out the Continuation | 1. If more than one |
| 4.1 | Bank of America | 1 | Last 4 digits of a | ccount number 0081 | | \$5,814.43 |
| | Nonpriority Creditor's N PO Box 15220 Wilmington, DE | | When was the de | ebt incurred? | | - |
| | Number Street City Sta | | As of the date yo | ou file, the claim is: Check al | I that apply | |
| | Who incurred the del | ot? Check one. | ☐ Contingent | | | |
| | Debtor 1 only | | ☐ Unliquidated | | | |
| | Debtor 2 only | | ☐ Disputed | | | |
| | Debtor 1 and Debto | or 2 only | | ORITY unsecured claim: | | |
| | ☐ At least one of the | debtors and anothe | | | | |
| | ☐ Check if this clain Is the claim subject to | | Obligations ar report as priority of | | ement or divorce that you did not | |
| | ■ No | | ☐ Debts to pens | ion or profit-sharing plans, and | d other similar debts | |
| | Yes | | Other. Specify | Charges made for to consumer of goods | | _ |

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| Debto | Abubeckr A Alsaidi | Case number (if known) | | |
|-------|---|---|------------|--|
| 4.2 | Bank of America | Last 4 digits of account number 0161 | \$1,284.85 | |
| | Nonpriority Creditor's Name PO Box 15220 | When was the debt incurred? | | |
| | Wilmington, DE 19886-5220 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ■ Debtor 1 only | ☐ Unliquidated | | |
| | ☐ Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | Charges made for the purchase of consumer of goods and services | | |
| 4.3 | Bank of America | Last 4 digits of account number 0730 | \$3,615.16 | |
| | Nonpriority Creditor's Name PO Box 15220 Wilmington, DE 10886 5220 | When was the debt incurred? | | |
| | Wilmington, DE 19886-5220 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | | |
| _ | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | □ Yes | Charges made for the purchase of consumer of goods and services | | |
| 4.4 | Barclays Bank Delaware | Last 4 digits of account number 0820 | \$2,531.00 | |
| | Nonpriority Creditor's Name PO Box 8803 Wilmington, DE 10000 | When was the debt incurred? | | |
| | Wilmington, DE 19899 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | ☐ Debtor 2 only | Disputed | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | | |
| | ☐ Yes | Charges made for the purchase of Other. Specify consumer of goods and services | | |

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| Debtoi | ebtor 1 Abubeckr A Alsaidi | Case number (if known) | | | | |
|--------|---|--|------------|--|--|--|
| 4.5 | Capital One Bank | Last 4 digits of account number 7431 | \$923.00 | | | |
| | Nonpriority Creditor's Name PO Box 71083 Charlette NC 28273 1083 | When was the debt incurred? | | | | |
| | Charlotte, NC 28272-1083 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | | | | |
| | Who incurred the debt? Check one. | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | | | | |
| | ☐ At least one of the debtors and another | Student loans | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not | | | | |
| | <u> </u> | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | ■ No □ Yes | Charges made for the purchase of consumer of goods and services | | | | |
| 4.6 | Carson Smithfiled | Last 4 digits of account number 1081 | \$818.27 | | | |
| | Nonpriority Creditor's Name PO Box 660397 Dallas, TX 75266-0397 | When was the debt incurred? | | | | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | | | | |
| | Who incurred the debt? Check one. | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | | | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | | | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Yes | Charges made for the purchase of consumer of goods and services | | | | |
| 4.7 | Citi Cards | Last 4 digits of account number 0072 | \$1,706.00 | | | |
| | Nonpriority Creditor's Name PO Box 182564 | When was the debt incurred? | | | | |
| | Columbus, OH 43218-2564 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | | |
| | <u> </u> | ☐ Contingent | | | | |
| | Debtor 1 only | ☐ Unliquidated | | | | |
| | Debtor 2 only | Disputed | | | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | |
| | At least one of the debtors and another | ☐ Student loans | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | $\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Yes | Charges made for the purchase of consumer of goods and services | | | | |

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| Debto | r 1 Abubeckr A Alsaidi | Case number (if known) | | | |
|-------------|---|---|------------|--|--|
| 4.8 | Credit One Bank | Last 4 digits of account number 0623 | \$2,212.00 | | |
| | Nonpriority Creditor's Name PO Box 60500 | When was the debt incurred? | | | |
| | City of Industry, CA 91716-0500 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | ■ Debtor 1 only | ☐ Unliquidated | | | |
| | ☐ Debtor 2 only | ☐ Disputed | | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | |
| | \square At least one of the debtors and another | ☐ Student loans | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | |
| | Yes | Charges made for the purchase of consumer of goods and services | | | |
| 4.9 | Hsbc Bank USA, N.A. | Last 4 digits of account number 1912 | \$2,033.00 | | |
| PO Box 4657 | Nonpriority Creditor's Name PO Box 4657 Carol Stream, IL 60197-4657 | When was the debt incurred? | | | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | | | |
| _ | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | ■ Debtor 1 only | ☐ Unliquidated | | | |
| | ☐ Debtor 2 only | ☐ Disputed | | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | |
| | Yes | Charges made for the purchase of consumer of goods and services | | | |
| 4.10 | Jpmcb Card | Last 4 digits of account number 4932 | \$2,176.00 | | |
| | Nonpriority Creditor's Name PO Box 15369 Wilmington, DE 19850 | When was the debt incurred? | | | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | ■ Debtor 1 only | ☐ Unliquidated | | | |
| | ☐ Debtor 2 only | ☐ Disputed | | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | |
| | \square At least one of the debtors and another | ☐ Student loans | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | | | |
| | ☐Yes | Charges made for the purchase of Other. Specify consumer of goods and services | | | |

20-10596-rg Doc 1 Filed 02/26/20 Entered 02/26/20 11:23:27 Main Document Pg 22 of 47 Abubeckr A Alsaidi Case number (if known)

| Debtor | 1 Abubeckr A Alsaidi | Case number (if known) | | | | |
|------------------------|--|---|---------------|--|--|--|
| 4.11 | Syncb/Home Design Nonpriority Creditor's Name | Last 4 digits of account number 4193 | \$1,464.62 | | | |
| | PO Box 965036 | When was the debt incurred? | | | | |
| | Orlando, FL 32896-5036 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | | | | |
| | Who incurred the debt? Check one. | _ | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | | | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | | | |
| | ☐ Check if this claim is for a community deb | | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | ☐Yes | ■ Other. Specify Consumer of goods and services | | | | |
| 4.12 | Synchrony Bank Nonpriority Creditor's Name | Last 4 digits of account number 9299 | \$1,464.00 | | | |
| | PO Box 960090 Orlando, FL 32896 | When was the debt incurred? | | | | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | |
| | Debtor 1 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 2 only | □ Disputed | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | | | |
| | ☐ Check if this claim is for a community debter ls the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | □Yes | ■ Other. Specify Charges made for the purchase of consumer of goods and services | | | | |
| Part 3: | List Others to Be Notified About a De | bt That You Already Listed | | | | |
| 5. Use the trying more | nis page only if you have others to be notified al to collect from you for a debt you owe to some than one creditor for any of the debts that you lebts in Parts 1 or 2, do not fill out or submit this | bout your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collect cone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to s page. | , if you have | | | |
| | | On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.12 of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims | | | | |
| | ox 27288 | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Temp | e, AZ 85285-7288 | Last 4 digits of account number | | | | |
| Caval | ry Portfolio Svcs, LL | On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.11 of (Check one): | | | | |
| | ox 27288 | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| remp | e, AZ 85285-7288 | Last 4 digits of account number | | | | |
| | nd Address | On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.6 of (Check one): | | | | |
| 101 C | roosways Park Dr W | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Wood | bury, NY 11797 | Last 4 digits of account number | | | | |
| | | | | | | |
| | nd Address Funding LLC | On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims | | | | |
| | xecutive Center Drive | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| #300 | W 00 00045 | — Fart 2. Oreanors with Northholity onsecuted Claims | | | | |
| Green | ville, SC 29615 | Last 4 digits of account number | | | | |

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| Debtor 1 Abubeckr A Alsaidi | | Case number (if known) | | | |
|---|----------------------------------|--|--|--|--|
| Name and Address | On which entry in Part 1 or Part | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| Portfolio Recovery Assc | Line 4.4 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | |
| 140 Corporate Blvd. Norfolk, VA 23502 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| NOTIOIR, VA 23302 | Last 4 digits of account number | | | | |
| Name and Address | · | 2 did you list the original creditor? | | | |
| Portfolio Recovery Assc | Line 4.9 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | |
| 140 Corporate Blvd. Norfolk, VA 23502 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| NOTIOIR, VA 23302 | Last 4 digits of account number | | | | |
| Name and Address | | 2 did you list the original creditor? | | | |
| Portfolio Recovery Assc | Line 4.5 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | |
| 140 Corporate Blvd. Norfolk, VA 23502 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| | Last 4 digits of account number | | | | |
| Name and Address | On which entry in Part 1 or Part | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| Sunrise Credit Services | Line 4.1 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | |
| PO Box 9100 Farmingdale, NY 11735-9100 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Tarininguale, NT 11733-3100 | Last 4 digits of account number | | | | |
| Name and Address | · | 2 did you list the original creditor? | | | |
| Sunrise Credit Services | Line 4.2 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | |
| PO Box 9100 Farmingdale, NY 11735-9100 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Tarininguale, WT 11755-5100 | Last 4 digits of account number | | | | |
| Name and Address | | 2 did you list the original creditor? | | | |
| Sunrise Credit Services | Line 4.3 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | |
| PO Box 9100 Farmingdale, NY 11735-9100 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| i ailiniiguale, Ni 11/33-3100 | Last 4 digits of account number | | | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|-----------------------------|-----|---|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 0.00 |
| otal claims rom Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 26,042.33 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 26,042.33 |

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| Fill in this infor | rmation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|-------------------------------|
| Debtor 1 | Abubeckr A Alsai | idi | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this amended filir |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | whom you have the , Street, City, State and ZIP | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|--|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | <u> </u> | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.3 | | | <u> </u> | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | | | <u> </u> | · | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | | | | | |

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| | | | Pg 25 01 47 | | |
|-------------------------|--|------------------------------|-------------------------|---------------------------------------|---|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Abubeckr A Alsa | idi | | | |
| 200101 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing | g) First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | | |
| Casa numb | | | | | |
| Case numb (if known) | Dei | | | | ☐ Check if this is an |
| | | | | | amended filing |
| | | | | | |
| Official | Form 106H | | | | |
| Sched | ule H: Your Cod | lebtors | | | 12/15 |
| | | | | | |
| | and case number (if known | , | | e as a codebtor. | |
| ■ No □ Yes | | | | | |
| | nin the last 8 years, have yo a, California, Idaho, Louisiana | | | | ty states and territories include) |
| ■ No. | Go to line 3. | | | | |
| ☐ Yes. | . Did your spouse, former spo | use, or legal equivalent liv | e with you at the time? | | |
| | | | | | |
| in line Form 1 | 2 again as a codebtor only | if that person is a guarar | ntor or cosigner. Make | sure you have listed | ng with you. List the person showr the creditor on Schedule D (Officia , Schedule E/F, or Schedule G to |
| C | Column 1: Your codebtor | | | Column 2: The cre | editor to whom you owe the debt |
| N | lame, Number, Street, City, State and Z | IP Code | | Check all schedule | • |
| 2.1 | | | | □ Sahadula D. lin | |
| 3.1 | Name | | | □ Schedule D, lin □ Schedule E/F, | |
| | | | | ☐ Schedule G, lir | |
| _ | Otro-ot | | | — — — — — | |
| | Number Street City | State | ZIP Code | | |
| | • | | | | |
| | | | | Пол | |
| 3.2 | Name | | | Schedule D, lin | |
| | | | | ☐ Schedule E/F,☐ Schedule G, lir | |
| _ | | | | | ie |
| | Number Street City | State | ZIP Code | | |
| - | • | | | | |

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| Deb | tor 1 | Abubeckr A | Alsaidi | | |
|---------------------------|--|--|--|--|---|
| | tor 2 use, if filing) | | | | |
| nit | ed States Bankrupto | cy Court for the | e: SOUTHERN DISTRIC | CT OF NEW YORK | |
| | e number | | | - | Check if this is: An amended filing |
| | | | | | A supplement showing postpetition chapter 13 income as of the following date: |
| O f | ficial Form | <u> 1061</u> | | | MM / DD/ YYYY |
| | | | | | |
| e a upp pou | olying correct informuse. If you are sepa h a separate sheet | curate as pos mation. If you trated and you to this form. | sible. If two married pen are married and not fil ar spouse is not filing w On the top of any addit | ing jointly, and your spouse is living ith you, do not include information | d Debtor 2), both are equally responsible for gwith you, include information about your about your spouse. If more space is neede |
| e a | s complete and acc llying correct informose. If you are sepa h a separate sheet | curate as pos mation. If you rrated and you to this form. Employment | sible. If two married pen are married and not fil ar spouse is not filing w On the top of any addit | ing jointly, and your spouse is living ith you, do not include information | d Debtor 2), both are equally responsible for g with you, include information about your about your spouse. If more space is neede ase number (if known). Answer every quest |
| e ar | s complete and according correct information. See Separate sheet Describe Fill in your employinformation. If you have more the | curate as pos mation. If you trated and you to this form. Employment yment | sible. If two married per are married and not fil ur spouse is not filing w On the top of any addit | ing jointly, and your spouse is living ith you, do not include information ional pages, write your name and c | d Debtor 2), both are equally responsible for with you, include information about your about your spouse. If more space is neede ase number (if known). Answer every quest |
| e as ipp oou tac | s complete and according correct information. It you have more that a separate product information about a separate print information about a separate prin | curate as pos mation. If you trated and you to this form. Employment yment nan one job, page with | sible. If two married pen are married and not fil ar spouse is not filing w On the top of any addit | ing jointly, and your spouse is living ith you, do not include information ional pages, write your name and complete the property of the prope | d Debtor 2), both are equally responsible for gwith you, include information about your about your spouse. If more space is neede ase number (if known). Answer every quest |
| e as ipp oou tac | s complete and according correct information. If you have more that a separate parate sheet T: Describe Fill in your employinformation. | curate as pos mation. If you trated and you to this form. Employment yment nan one job, page with | sible. If two married per are married and not fil ur spouse is not filing w On the top of any addit | ing jointly, and your spouse is living ith you, do not include information ional pages, write your name and c Debtor 1 Employed | d Debtor 2), both are equally responsible for gwith you, include information about your about your spouse. If more space is neede ase number (if known). Answer every quest Debtor 2 or non-filing spouse |
| e as ipp oou tac | s complete and according correct information. It you have more that a separate product information about a separate print information about a separate prin | curate as pos mation. If you arated and you to this form. Employment yment nan one job, bage with additional | sible. If two married per are married and not fil are married and not fil ar spouse is not filing we On the top of any addit | ing jointly, and your spouse is living ith you, do not include information ional pages, write your name and c Debtor 1 Employed Not employed | d Debtor 2), both are equally responsible for gwith you, include information about your about your spouse. If more space is neede ase number (if known). Answer every quest Debtor 2 or non-filing spouse Employed Not employed |

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- Calculate gross Income. Add line 2 + line 3.

| | | For Debtor 1 | | Debtor 2 or filing spouse |
|----|-----|--------------|------|---------------------------|
| 2. | \$ | 0.00 | \$ | 0.00 |
| 3. | +\$ | 0.00 | +\$_ | 0.00 |
| 4. | \$ | 0.00 | \$_ | 0.00 |

Official Form 106l Schedule I: Your Income page 1

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| Debt | tor 1 | Abubeckr A Alsaidi | _ | Case | number (if known) | | |
|------|-------------|---|------------|------------|-------------------|----------------|---------------------------------|
| | | | | For | Debtor 1 | | ebtor 2 or ling spouse |
| | Сор | y line 4 here | 4. | \$ | 0.00 | \$ | 0.00 |
| 5. | List | all payroll deductions: | | | | | |
| ٥. | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 0.00 | \$ | 0.00 |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$- | 0.00 | \$ | 0.00 |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$_ | 0.00 | \$ | 0.00 |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | 0.00 |
| | 5e. | Insurance | 5e. | \$ | 0.00 | \$ | 0.00 |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | 0.00 |
| | 5g. | Union dues | 5g. | \$_ | 0.00 | \$ | 0.00 |
| | 5h. | Other deductions. Specify: | 5h.+ | * \$_ | 0.00 | + \$ | 0.00 |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$_ | 0.00 | \$ | 0.00 |
| 7. | Calc | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 0.00 | \$ | 0.00 |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 1,075.00 | \$ | 0.00 |
| | 8b. | Interest and dividends | 8b. | \$_ | 0.00 | \$ | 0.00 |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependen regularly receive Include alimony, spousal support, child support, maintenance, divorce | t | · <u> </u> | | | |
| | 8d. | settlement, and property settlement. Unemployment compensation | 8c. 8d. | \$_ \$ | 0.00 | \$ | 0.00 |
| | 8e. | Social Security | 8e. | \$ _ | 0.00 | \$ | 0.00 |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | | \$_ \$ | 0.00 | \$ | 0.00 |
| | 8g. | Pension or retirement income | — 8g. | \$ | 0.00 | \$ | 0.00 |
| | 8h. | Other monthly income. Specify: Family Support | 8h.+ | \$_ | 1,000.00 | + \$ | 0.00 |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 2,075.00 | \$ | 0.00 |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | | 2,075.00 + \$_ | | 0.00 = \$ 2,075.00 |
| 11. | Incluothe | e all other regular contributions to the expenses that you list in <i>Schedul</i> ude contributions from an unmarried partner, members of your household, you or friends or relatives. | r deper | | • | | hadula I |
| | Spe | not include any amounts already included in lines 2-10 or amounts that are not cify: | avalidi | JE IO | pay expenses list | .eu III 30 | 11. + \$ 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The ree that amount on the Summary of Schedules and Statistical Summary of Certies | | | | | 12. \$ 2,075.00 Combined |
| 13. | Do y | ou expect an increase or decrease within the year after you file this form | 1? | | | | monthly income |

Official Form 106l Schedule I: Your Income page 2

Yes. Explain:

| Fill | in this information to identify you | r case: | | | | |
|------|---|---|---|------------------|-------------------|---|
| | otor 1 Abubeckr A A | | | Check | c if this is: | |
| | | iouiui | | | An amended filing | |
| | otor 2 ouse, if filing) | | | | | ving postpetition chapter the following date: |
| Unit | ted States Bankruptcy Court for the: | SOUTHERN DISTRICT OF NEW | YORK | <u> </u> | MM / DD / YYYY | |
| | se number | | | | | |
| | znown) | | | | | |
| O | fficial Form 106J | | | | | |
| | chedule J: Your E | Ynenses | | | | 12/15 |
| Be | as complete and accurate as p | oossible. If two married people and ded, attach another sheet to this | | | | or supplying correct |
| Par | Describe Your Househ | old | | | | |
| ١. | No. Go to line 2. | | | | | |
| | ☐ Yes. Does Debtor 2 live in | a separate household? | | | | |
| | ☐ No ☐ Yes. Debtor 2 must | file Official Form 106J-2, Expense | s for Separate House | ehold of Debt | or 2. | |
| 2. | Do you have dependents? | □ No | · | | | |
| | Do not list Dobton 4 | Yes. Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | | □ No |
| | dependents names. | | Daughter | | 3 | ■ Yes □ No |
| | | | Son | | 5 | ■ Yes |
| | | | 1476 | | | □ No |
| | | | Wife | | <u>27</u> | ■ Yes □ No |
| | | | | | | ☐ Yes |
| 3. | Do your expenses include expenses of people other that | ■ No | | | | |
| | yourself and your dependent | | | | | |
| Est | | g Monthly Expenses ir bankruptcy filing date unless y inkruptcy is filed. If this is a supp | | | | |
| the | | on-cash government assistance have included it on Schedule I: | | | Your expe | enses |
| 4. | | p expenses for your residence. I | Include first mortgage | e 4 ¢ | | 1,600.00 |
| | payments and any rent for the | ground or lot. | | 4. \$ | | 1,000.00 |
| | If not included in line 4: | | | | | |
| | 4a. Real estate taxes | or rontorio incurence | | 4a. \$ | | 0.00 |
| | 4b. Property, homeowner's,4c. Home maintenance, repair | or renter's insurance air, and upkeep expenses | | 4b. \$ 4c. \$ | | 0.00 |
| | 4d. Homeowner's association | | | 4d. \$ | | 0.00 |
| 5. | Additional mortgage paymen | its for your residence, such as ho | me equity loans | 5. \$ | | 0.00 |

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| Debtor 1 | Abubeckr A Alsaidi | Case num | ber (if known) | |
|---------------------------|---|--------------|------------------|------------------------------|
| 6. Utiliti | es: | | | |
| 6a. | Electricity, heat, natural gas | 6a. | \$ | 100.00 |
| 6b. | Water, sewer, garbage collection | 6b. | \$ | 0.00 |
| | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 100.00 |
| 6d. | Other. Specify: | 6d. | \$ | 0.00 |
| 7. Food | and housekeeping supplies | | \$ | 600.00 |
| | care and children's education costs | 8. | · | 0.00 |
| | ing, laundry, and dry cleaning | | \$ | 100.00 |
| | onal care products and services | 10. | | 0.00 |
| | cal and dental expenses | 11. | | 0.00 |
| | sportation. Include gas, maintenance, bus or train fare. | | Ψ | 0.00 |
| | ot include car payments. | 12. | \$ | 0.00 |
| | tainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 75.00 |
| | table contributions and religious donations | 14. | | 0.00 |
| 5. Insur | | | · | 0.00 |
| | of include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | Life insurance | 15a. | \$ | 0.00 |
| 15b. | Health insurance | 15b. | \$ | 0.00 |
| 15c. | Vehicle insurance | 15c. | · | 0.00 |
| 15d. | Other insurance. Specify: | 15d. | \$ | 0.00 |
| | 5. Do not include taxes deducted from your pay or included in lines 4 or 20. | | · | <u> </u> |
| Speci | | 16. | \$ | 0.00 |
| 7. Instal | Ilment or lease payments: | | · | |
| | Car payments for Vehicle 1 | 17a. | \$ | 0.00 |
| 17b. | Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| 17c. | Other. Specify: | 17c. | \$ | 0.00 |
| 17d. | Other. Specify: | 17d. | \$ | 0.00 |
| 8. Your | payments of alimony, maintenance, and support that you did not report as | | | |
| | cted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | · | 0.00 |
| Other | r payments you make to support others who do not live with you. | | \$ | 0.00 |
| Speci | | 19. | | |
| | real property expenses not included in lines 4 or 5 of this form or on Sche | | | |
| | Mortgages on other property | 20a. | | 0.00 |
| | Real estate taxes | 20b. | \$ | 0.00 |
| 20c. | Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| 20d. | Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| 20e. | Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| 1. Other | r: Specify: | 21. | +\$ | 0.00 |
| 0 0-1 | | | | |
| | ulate your monthly expenses | | • | 0.575.00 |
| | Add lines 4 through 21. | | \$ | 2,575.00 |
| | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| 22c. A | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 2,575.00 |
| 3 Calcu | late your monthly net income. | | | |
| | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | Φ | 2.075.00 |
| | Copy your monthly expenses from line 22c above. | 23a. 23b. | · | 2,075.00 2,575.00 |
| ۷۵۵. | copy your monthly expenses nom line 220 above. | ۷۵۵. | -φ | 2,373.00 |
| 23c | Subtract your monthly expenses from your monthly income. | | | |
| 200. | The result is your <i>monthly net income</i> . | 23c. | \$ | -500.00 |
| | , , | | <u> </u> | |
| | ou expect an increase or decrease in your expenses within the year after yo | | | |
| | ample, do you expect to finish paying for your car loan within the year or do you expect your n | nortgage pa | ayment to increa | ase or decrease because of a |
| _ | cation to the terms of your mortgage? | | | |
| ■ No |). | | | |
| ☐ Ye | | | | |

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| Fill in this infor | rmation to identify your | c350: | | | | |
|---------------------|--|--------------------------|--------------|-----------------|--------------------|--|
| | | | | | | |
| Debtor 1 | Abubeckr A Alsai First Name | Middle Name | Las | Name | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Las | Name | | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW Y | ORK | | |
| Case number | | | | | | |
| (if known) | | | | | | ☐ Check if this is an amended filing |
| Official For | | | 5.14 | | | |
| Declarat | tion About a | n Individual | Debto | or's Sch | edules | 12/15 |
| , , | l8 U.S.C. §§ 152, 1341, 1 n Below | 0.0, a.i.a 00. i. | | | | |
| Did you pa | ay or agree to pay some | one who is NOT an attor | rney to help | you fill out ba | nkruptcy forms? | |
| ■ No | | | | | | |
| ☐ Yes. | Name of person | | | | | nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119) |
| | alty of perjury, I declare re true and correct. | that I have read the sum | nmary and s | chedules filed | with this declarat | ion and |
| X /s/ Abi | ubeckr A Alsaidi | | Х | | | |
| Abube | eckr A Alsaidi ure of Debtor 1 | | | Signature of D | ebtor 2 | |
| Date _ | February 26, 2020 | | | Date | | |

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| F:II : | n this inform | ation to identify | | | | |
|-----------------|--|--|---|------------------------------------|---|------------------------------------|
| | | ation to identify you | | | | |
| Debt | tor 1 | Abubeckr A Alsa First Name | Aidi Middle Name | Last Name | | |
| Debt | tor 2 | | | | | |
| (Spou | se if, filing) | First Name | Middle Name | Last Name | | |
| Unite | ed States Ban | kruptcy Court for the: | SOUTHERN DISTRICT C | OF NEW YORK | | |
| Case (if kno | e number | | | | - | theck if this is an mended filing |
| Sta | | of Financial | Affairs for Individ | | ankruptcy | 4/19 |
| infor | mation. If mo | | attach a separate sheet to | | y additional pages, write yo | |
| Part | 1: Give D | etails About Your Ma | arital Status and Where You | Lived Before | | |
| 1. ' | What is your | current marital statu | ıs? | | | |
| | ■ Married□ Not marr | ied | | | | |
| 2. | During the la | st 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No □ Yes. List | all of the places you | lived in the last 3 years. Do no | ot include where you live nov | v. | |
| | Debtor 1 Pri | | Dates Debtor 1 lived there | Debtor 2 Prior Ad | | Dates Debtor 2 lived there |
| | | | | | nity property state or territor ico, Texas, Washington and V | |
| | ■ No □ Yes. Mak | ke sure you fill out <i>Sci</i> | hedule H: Your Codebtors (O | fficial Form 106H). | | |
| Part | 2 Explain | the Sources of You | r Income | | | |
| | Fill in the total | amount of income yo | nployment or from operating the received from all jobs and a have income that you received. | all businesses, including part | | ndar years? |
| | □ No ■ Yes. Fill | in the details. | | | | |
| | | | D.L. | | D.L. | |
| | | | Debtor 1 Sources of income | Gross income | Debtor 2 | Gross income |
| | | | Check all that apply. | (before deductions and exclusions) | Sources of income Check all that apply. | (before deductions and exclusions) |
| | | of current year until I for bankruptcy: | ☐ Wages, commissions, bonuses, tips | \$1,343.75 | ☐ Wages, commissions, bonuses, tips | |
| | | | Operating a business | | ☐ Operating a business | |

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| Debtor 1 | Abubeckr A | Alsaidi | | ry 32 0 | | se number (if known) | | |
|----------|--------------------------------------|------------------------------|---|------------------------------|---|-------------------------------|----------------|---|
| | | | Debtor 1 | | | Debtor 2 | | |
| | | | Sources of income Check all that apply. | | income e deductions and ions) | Sources of inco | | Gross income (before deductions and exclusions) |
| | calendar year: 1 to December 3 | 1, 2019) | ☐ Wages, commissions, bonuses, tips | | \$12,900.00 | ☐ Wages, com bonuses, tips | missions, | |
| | | | Operating a business | | | ☐ Operating a l | ousiness | |
| | alendar year before 1 to December 3 | | ☐ Wages, commissions, bonuses, tips | | \$12,212.00 | ☐ Wages, com bonuses, tips | missions, | |
| | | | Operating a business | | | ☐ Operating a I | ousiness | |
| _ | No Yes. Fill in the det | - | Debtor 1 Sources of income | Gross | income from | Debtor 2 Sources of inco | ome | Gross income |
| | | | | each s | income from source deductions and | | | Gross income (before deductions and exclusions) |
| From la | nuary 1 of curren | t vear until | Family Contribution | exclus | ions) \$1,000.00 | | | |
| the date | you filed for ban | kruptcy: | railing Contribution | | \$1,000.00 | | | |
| Part 3: | List Certain Pay | ments You | Made Before You Filed fo | or Bankrun | tcv | | | |
| 6. Are e | either Debtor 1's No. Neither De | or Debtor 2 btor 1 nor D | 's debts primarily consum bebtor 2 has primarily con personal, family, or housel | ner debts? Isumer deb | its. Consumer deb | ots are defined in 11 | U.S.C. § 10 | 1(8) as "incurred by an |
| | During the 9 | 90 days befo | re you filed for bankruptcy, | did you pay | any creditor a tot | al of \$6,825* or mo | re? | |
| | □ _{No.} □ _{Yes} | Go to line 7 | | oid a tatal (| of the earth ar mare | in one or more no. | monto and t | ha tatal amount vou |
| | | paid that cre not include | each creditor to whom you peditor. Do not include paym payments to an attorney for ton 4/01/22 and every 3 ye | ents for dor r this bankr | mestic support obluptcy case. | igations, such as ch | nild support a | and alimony. Also, do |
| | Yes. Debtor 1 o | r Debtor 2 o | r both have primarily control you filed for bankruptcy, | sumer deb | ts. | | , | |
| | ■ No. | Go to line 7 | | | | | | |
| | □ Yes | include pay | each creditor to whom you pments for domestic support for this bankruptcy case. | | | | | |
| Cred | ditor's Name and | Address | Dates of paym | nent | Total amount | Amount you still owe | Was this p | payment for |

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Debtor 1 Abubeckr A Alsaidi Case number (if known)

| 7. | Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general pacorporations of which you are an officer, directincluding one for a business you operate as a support and alimony. | artners; relatives of any gen ctor, person in control, or ow | eral partners; partners | erships of which ye of their voting se | ou are a gener curities; and ar | al partner; ny managing agent, |
|-----|--|---|-------------------------|--|------------------------------------|-----------------------------------|
| | ■ No | | | | | |
| | ☐ Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| 3. | Within 1 year before you filed for bankrupt insider? | cy, did you make any pay | ments or transfer a | any property on a | account of a d | ebt that benefited an |
| | Include payments on debts guaranteed or cos | signed by an insider. | | | | |
| | No | | | | | |
| | ☐ Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment litor's name |
| Pai | tt 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | |
| | , , , | , | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. | | | | | |
| | No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | e case |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo | | erty repossessed, f | oreclosed, garni | shed, attache | d, seized, or levied? |
| | No. Go to line 11.Yes. Fill in the information below. | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the property |
| | | Explain what happened | | | | |
| 11. | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? | | | | | |
| | No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Creditor Name and Address | Describe the action the | creditor took | Date taker | action was | Amount |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a | | erty in the possess | ion of an assigne | ee for the ben | efit of creditors, a |
| | ■ No | | | | | |
| | ☐ Yes | | | | | |
| Pai | tt 5: List Certain Gifts and Contributions | | | | | |
| 13. | Within 2 years before you filed for bankrup No | otcy, did you give any gifts | s with a total value | of more than \$6 | 00 per person | ? |
| | Yes. Fill in the details for each gift. | | | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | | Date the g | s you gave jifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | | | |

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Address

Description and value of

property transferred

Person Who Received Transfer

Person's relationship to you

Date transfer was

made

Describe any property or

paid in exchange

payments received or debts

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Debtor 1 Abubeckr A Alsaidi Case number (if known)

| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. | | | | | | ou are a |
|-----|--|--|--|-------------|--|-------------------|--------------------------------------|
| | Name of trust | Description and v | alue of the pro | operty tran | sferred | Date Trai | nsfer was |
| Pa | t 8: List of Certain Financial Accounts, Inst | ruments, Safe Deposi | t Boxes, and S | storage Uni | its | | |
| 20. | Within 1 year before you filed for bankruptcy sold, moved, or transferred? | , were any financial ac | counts or inst | ruments h | eld in your name, or for | your benefi | t, closed, |
| | Include checking, savings, money market, or houses, pension funds, cooperatives, associ No | | , | | sit; shares in banks, cre | dit unions, k | orokerage |
| | Yes. Fill in the details. | | | | | | |
| | | Last 4 digits of account number | Type of acco instrument | ount or | Date account was closed, sold, moved, or transferred | | st balance closing or transfer |
| 21. | Do you now have, or did you have within 1 yearsh, or other valuables? | ear before you filed fo | r bankruptcy, a | any safe de | eposit box or other depo | ository for se | curities, |
| | ■ No □ Yes. Fill in the details. | | instrument closed, sold, moved, or transferred for bankruptcy, any safe deposit box or other depository for saccess to it? Describe the contents Do yo have it or had access Describe the contents Do yo have it or had access Describe the contents Do yo have it or had access Describe the contents Do yo have it or had access Describe the contents Do yo have it or had access | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe | the contents | Do you have it | |
| 22. | Have you stored property in a storage unit or | place other than your | r home within | 1 year befo | ore you filed for bankru | ptcy? | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or I to it? Address (Number, S State and ZIP Code) | | Describe | the contents | Do you have it | |
| Pai | t 9: Identify Property You Hold or Control for | or Someone Else | | | | | |
| 23. | Do you hold or control any property that som for someone. | neone else owns? Incl | ude any prope | rty you boı | rrowed from, are storing | g for, or hold | l in trust |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe | the property | | Value |
| Pa | t 10: Give Details About Environmental Info | rmation | | | | | |
| For | the purpose of Part 10, the following definitio | ns apply: | | | | | |
| | Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these | e air, land, soil, surfac | e water, groun | | | | |
| | Site means any location, facility, or property to own, operate, or utilize it, including dispos | - | environmental | law, whetl | her you now own, opera | ate, or utilize | it or used |
| | Hazardous material means anything an envir | onmontal law defines | ac a hazardou | e wasto h | azardous substanco to | vic cubetano | ~~ |

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

hazardous material, pollutant, contaminant, or similar term.

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Debtor 1 Abubeckr A Alsaidi Case number (if known)

| 24. | Has | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | | |
|-----|--|--|--|---------|--|--------------------|--|--|
| | | No Yes. Fill in the details. | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State a ZIP Code) | and | Environmental law, if you know it | Date of notice | | |
| 25. | Hav | ve you notified any governmental unit of | any release of hazardous material? | | | | | |
| | | No Yes. Fill in the details. | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State a ZIP Code) | and | Environmental law, if you know it | Date of notice | | |
| 26. | Hav | re you been a party in any judicial or adr | ninistrative proceeding under any er | viror | nmental law? Include settlements | and orders. | | |
| | | No Yes. Fill in the details. | | | | | | |
| | | se Title se Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Na | ature of the case | Status of the case | | |
| Par | t 11: | Give Details About Your Business or | Connections to Any Business | | | | | |
| 27. | Wit | hin 4 years before you filed for bankrup | tcy, did you own a business or have | any o | of the following connections to any | / business? | | |
| | | ☐ A sole proprietor or self-employed i | n a trade, profession, or other activi | ty, eit | her full-time or part-time | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | |
| | ☐ A partner in a partnership | | | | | | | |
| | | ☐ An officer, director, or managing ex | ecutive of a corporation | | | | | |
| | | ☐ An owner of at least 5% of the votin | g or equity securities of a corporation | n | | | | |
| | No. None of the above applies. Go to Part 12. | | | | | | | |
| | Yes. Check all that apply above and fill in the details below for each business. | | | | | | | |
| | | siness Name dress | Describe the nature of the business | S | Employer Identification number Do not include Social Security number or ITIN. | | | |
| | | mber, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | r | Dates business existed | | | |
| 28. | | hin 2 years before you filed for bankrup itutions, creditors, or other parties. | tcy, did you give a financial statemer | nt to a | anyone about your business? Inclu | ude all financial | | |
| | | No | | | | | | |
| | | Yes. Fill in the details below. | | | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | | | | | | | |
| | | | | | | | | |

Doc 1 Filed 02/26/20 Entered 02/26/20 11:23:27 20-10596-rg Pq 37 of 47 Debtor 1 Abubeckr A Alsaidi Case number (if known) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Abubeckr A Alsaidi Signature of Debtor 2 Abubeckr A Alsaidi Signature of Debtor 1 Date Date February 26, 2020 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Main Document

Official Form 107

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| | | | | • |
|---------------------|---------------------------------|------------------|--|-------------------------------------|
| Fill in this infor | rmation to identify your case | e: | | |
| Debtor 1 | Abubeckr A Alsaidi | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: SC | OUTHERN DIS | TRICT OF NEW YORK | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| | | | | |
| | | | | |
| Official Fo | orm 108 | | | |
| Stateme | nt of Intention | for Indiv | iduals Filing Under Chapt | er 7 |
| <u> </u> | | ioi iiiai | riduale i ming ender ender | 12/13 |
| If you are an ind | dividual filing under chapter | . 7 vou must fi | Il out this form if: | |
| | ve claims secured by your p | - | ii out tills form ii. | |
| _ | | • • | | |
| | sed personal property and t | | | |
| | | | you file your bankruptcy petition or by the date some time for cause. You must also send copies to t | |
| on the | | buil exterios ti | te time for eduse. For must also send copies to t | ne creditors and lessons you list |
| | | | | |
| | | a joint case, be | oth are equally responsible for supplying correct | information. Both debtors must |
| sign ai | nd date the form. | | | |
| Be as complete | and accurate as possible. I | f more space i | s needed, attach a separate sheet to this form. O | n the top of any additional pages, |
| | our name and case number | | | pages, |
| | | | | |
| Part 1: List Y | our Creditors Who Have Se | cured Claims | | |
| 1 For any credit | tors that you listed in Part 1 | of Schedule I | D: Creditors Who Have Claims Secured by Proper | ty (Official Form 106D) fill in the |
| information b | | or ochedule i | o. Orealtors will have claims decared by Froper | ty (Omeiai i omi 1005), im in the |
| | reditor and the property that i | is collateral | What do you intend to do with the property that | |
| | | | secures a debt? | as exempt on Schedule C? |
| Creditor's | | | По 1 и . | |
| name: | | | ☐ Surrender the property. | □ No |
| name. | | | Retain the property and redeem it. | □Yes |
| Description of | f | | ☐ Retain the property and enter into a Reaffirmation Agreement. | 163 |
| property | | | ☐ Retain the property and [explain]: | |
| securing debt | t: | | Trotain the property and [explain]. | |
| · · | | | | _ |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | |
| | | | Retain the property and enter into a | ☐ Yes |
| Description of | f | | Reaffirmation Agreement. | |
| property | | | ☐ Retain the property and [explain]: | |
| securing debt | :: | | | |
| | | | | |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | ☐ Retain the property and redeem it. | <u>_</u> |
| | , | | ☐ Retain the property and enter into a | ☐ Yes |
| Description of | Ī | | Reaffirmation Agreement. | |
| property | | | ☐ Retain the property and [explain]: | |
| securing debt | t: | | | |

Official Form 108

Creditor's

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

☐ No

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| Debto | 1 Abubeckr A Alsaidi | Case number (# | known) |
|---------|--|---|--|
| prop | ne: cription of perty uring debt: | □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | □ Yes |
| n the i | y unexpired personal property lease that you lis nformation below. Do not list real estate leases | ses ted in Schedule G: Executory Contracts and Un . Unexpired leases are leases that are still in effe e if the trustee does not assume it. 11 U.S.C. § 3 | ect; the lease period has not yet ended. |
| Descr | ibe your unexpired personal property leases | | Will the lease be assumed? |
| | r's name: ption of leased rty: | | □ No □ Yes |
| | r's name: ption of leased rty: | | □ No □ Yes |
| | r's name: ption of leased rty: | | □ No |
| | r's name: ption of leased rty: | | □ No □ Yes |
| | r's name: ption of leased rty: | | □ No |
| | r's name: ption of leased rty: | | □ No □ Yes |
| | r's name: ption of leased rty: | | □ No |
| | Sign Below | | La Tes |
| | penalty of perjury, I declare that I have indicated ty that is subject to an unexpired lease. | d my intention about any property of my estate t | hat secures a debt and any personal |
| _ | s/ Abubeckr A Alsaidi bubeckr A Alsaidi ignature of Debtor 1 | XSignature of Debtor 2 | |
| | ate February 26, 2020 | Date | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation | |
|------------|--------------------|--|
| \$245 | filing fee | |
| \$75 | administrative fee | |
| + \$15 | trustee surcharge | |
| \$335 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. 20-10596-rg Doc 1 Filed 02/26/20 Entered 02/26/20 11:23:27 Main Document Pg 44 of 47

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of New York

| In re | Abubeckr A Alsaidi | | Case No. | |
|-------|--|--|---|-------------------------------------|
| | | Debtor(s) | Chapter | 7 |
| | DISCLOSURE OF COMPENSA | TION OF ATTO | RNEY FOR DI | EBTOR(S) |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the be rendered on behalf of the debtor(s) in contemplation of or in | ne petition in bankruptcy, | or agreed to be paid | to me, for services rendered or to |
| | For legal services, I have agreed to accept | | \$ | 1,500.00 |
| | Prior to the filing of this statement I have received | | \$ | 1,500.00 |
| | Balance Due | | \$ | 0.00 |
| 2. | The source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 3. | The source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. | ■ I have not agreed to share the above-disclosed compensation | on with any other person | unless they are mem | bers and associates of my law firm. |
| | | | | |
| 5. | In return for the above-disclosed fee, I have agreed to render le | agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A the agreement, together with a list of the names of the people sharing in the compensation is attached. The above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | |
| | a. Analysis of the debtor's financial situation, and rendering acts. Preparation and filing of any petition, schedules, statement c. Representation of the debtor at the meeting of creditors and d. [Other provisions as needed] Negotiations with secured creditors to reduce reaffirmation agreements and applications as 522(f)(2)(A) for avoidance of liens on household. | of affairs and plan which confirmation hearing, and to market value; exc a needed; preparation | n may be required; and any adjourned hea emption planning | rings thereof; |
| 6. | By agreement with the debtor(s), the above-disclosed fee does Representation of the debtors in any discharg any other adversary proceeding. | | | es, relief from stay actions or |
| | CEI | RTIFICATION | | |
| | I certify that the foregoing is a complete statement of any agree ankruptcy proceeding. | ement or arrangement for | payment to me for re | epresentation of the debtor(s) in |
| F | ebruary 26, 2020 | /s/ Christopher L | . Esposito, Esq. | |
| Ī | ate | Christopher L. Es Signature of Attorne | | 815 |
| | | Christopher L. Es | | |
| | | 269 West 231st S | treet | |
| | | Bronx, NY 10463 718-796-6454 Fa | | |
| | | espositolaw@ver | | |
| | | Name of law firm | | |

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United States Bankruptcy Court Southern District of New York

| In re | Abubeckr A Alsaidi | Debtor(s) | Case No. Chapter | 7 |
|---------|----------------------------------|--|---------------------|-----------------------|
| | VER | IFICATION OF CREDITOR | MATRIX | |
| The abo | ove-named Debtor hereby verifies | that the attached list of creditors is true and co | orrect to the best | of his/her knowledge. |
| Date: | February 26, 2020 | /s/ Abubeckr A Alsaidi | | |

Signature of Debtor

BANK OF AMERICA PO BOX 15220 WILMINGTON, DE 19886-5220

BARCLAYS BANK DELAWARE PO BOX 8803 WILMINGTON, DE 19899

CAPITAL ONE BANK PO BOX 71083 CHARLOTTE, NC 28272-1083

CARSON SMITHFILED PO BOX 660397 DALLAS, TX 75266-0397

CAVALRY PORTFOLIO SERVICES, LL PO BOX 27288
TEMPE, AZ 85285-7288

CAVALRY PORTFOLIO SVCS, LL PO BOX 27288 TEMPE, AZ 85285-7288

CITI CARDS PO BOX 182564 COLUMBUS, OH 43218-2564

CREDIT ONE BANK
PO BOX 60500
CITY OF INDUSTRY, CA 91716-0500

CWS/CW NEXUS
101 CROOSWAYS PARK DR W
WOODBURY, NY 11797

HSBC BANK USA, N.A. PO BOX 4657 CAROL STREAM, IL 60197-4657

JPMCB CARD PO BOX 15369 WILMINGTON, DE 19850 LVNV FUNDING LLC 700 EXECUTIVE CENTER DRIVE #300 GREENVILLE, SC 29615

PORTFOLIO RECOVERY ASSC 140 CORPORATE BLVD. NORFOLK, VA 23502

SUNRISE CREDIT SERVICES PO BOX 9100 FARMINGDALE, NY 11735-9100

SYNCB/HOME DESIGN PO BOX 965036 ORLANDO, FL 32896-5036

SYNCHRONY BANK PO BOX 960090 ORLANDO, FL 32896